

JUL 2 1918

VOL. ~~XXXIX~~<sup>XI</sup>

No. 7

# THE CALIFORNIA ECLECTIC MEDICAL JOURNAL

Incorporating  
THE LOS ANGELES JOURNAL OF ECLECTIC MEDICINE  
AND THE CALIFORNIA MEDICAL JOURNAL

ISSUED MONTHLY

JULY, 1918

O. C. WELBOURN, A. M., M. D., Editor

DEVOTED TO THE  
DEVELOPMENT AND WELFARE OF ECLECTIC MEDICINE ON THE PACIFIC COAST

SUBSCRIPTION PRICE, ONE DOLLAR PER YEAR

"ENTERED AS SECOND-CLASS MATTER JAN. 23, 1909, AT THE POST OFFICE AT LOS ANGELES, CALIFORNIA  
UNDER ACT OF MARCH 3, 1879."

## A Remarkable Local Anesthetic

**A**POTHESINE is as efficient as any local anesthetic. It is not a derivative of cocaine; it is not subject to the narcotic law; it does not induce "habit" formation. It is far less toxic than cocaine and most of the other synthetic anesthetics. It dissolves readily in water or alcohol. It forms neutral solutions (not acid). It may be sterilized by boiling. It may be combined with any of the usual synergists. It is applicable in any case in which any other local anesthetic is advantageously used. It is being employed with marked success by thousands of surgeons and physicians.

Apothesine is a product of American origin and manufacture.

SUPPLIED AS HYPODERMIC TABLETS.

*H. T. No. 216.*—Each tablet contains  $1\frac{1}{4}$  grains of Apothesine. One tablet in 60 minims of water makes a 2% solution. Tubes of 20 and bottles of 100.

*H. T. No. 217.*—Each tablet contains  $\frac{3}{5}$  grain of Apothesine and  $\frac{1}{1600}$  grain of Adrenalin. One tablet in 60 minims of water makes a 1% solution of Apothesine in Adrenalin 1:100,000. Tubes of 25 and bottles of 100.

*H. T. No. 218 (Dental).*—Each tablet contains  $\frac{1}{2}$  grain of Apothesine and  $\frac{1}{2500}$  grain of Adrenalin. One tablet in 16 minims of water makes a 2% solution of Apothesine in Adrenalin 1:40,000. Tubes of 20 and bottles of 100.

Home Offices and Laboratories,  
Detroit, Michigan.

PARKE, DAVIS & CO.





**S**END for demonstration ampoules of Lilly's Liquid Bland and learn how you can insure best results from Iron Carbonate administered fresh with every dose.

*Supplied by the drug trade in four-ounce bottles only—Plain, with Arsenic, with Strychnine, and with Arsenic and Strychnine.*

**ELI LILLY & COMPANY**

Indianapolis, U. S. A.



# TAKE NOTICE

## Concerning the Doctor's Use of Alcohol in Prescriptions and Office Pharmacy

We do not propose to enter into the many problems that concern technical Internal Revenue Decisions, but in reply to many questions that reach us from physician patrons regarding the use of alcohol in their practice, we will state as follows:

In our opinion the aim of the Law is to **prevent** beverage alcohol from reaching the public in a **condition** that will enable it to be used as an alcoholic drink. Consequently everyone, including physicians, must conform to the rules, one of which is that only non-beverage alcohol and alcoholic remedies too highly medicated to be employed as a drink, can be used in prescriptions.

**Non-Beverage Alcohol.** Non-beverage alcohol is made by dissolving powerful poisons and specified energetics in alcohol, so as to make it impossible for the mixture to be used as a beverage. This, in our opinion, also makes its use impracticable in medicine. Such alcohol must, according to the rulings, contain appreciable amounts of substances, such as Carbolic Acid, Formaldehyde, Bichloride of Mercury, Alum or Lysol, in varying proportions, any one of which would forbid a physician from employing it as an alcoholic diluent in therapy. To drink such alcohol is to invite death. To use it in the preparation of a vegetable remedy would, in our opinion, be a crime.

## Specific Medicines Not Affected

It is fortunate for the medical profession that every Specific Medicine is so highly medicated, that it cannot be used as a beverage. The extreme dose is a few minims only, usually much diluted with water. There is no alcoholic influence in any possible dose of any Specific Medicine. Physicians can continue to dispense Specific Medicines in the usual manner, making their dilutions with water after the processes long established, according to directions on the label. In this we note the balanced foresight of the "Fathers" of old.

The Specific Medicines as a class are now, after many decades, not only accepted as standards of plant pharmacy, but not one item of the list is prohibited from physicians' use by any government rulings known to us. This applies also to every pharmaceutical preparation bearing Lloyd Brothers' label.

Pharmacists filling prescriptions for Specific Medicines, as well as physicians employing them according to directions on the labels, are not affected by, or concerned in, the Internal Revenue rulings regarding either beverage or non-beverage alcohol.

## TAKE NOTICE


The tax on the alcohol in every Specific Medicine has been paid by us. Physicians and pharmacists can prescribe them or compound them as directed on the labels, without any concern whatever. Only official alcohol is used. **Not one drop of Denatured Alcohol, or Non-Beverage Alcohol is in any Specific Medicine.**

**LLOYD BROTHERS**

FEBRUARY 15, 1918

CINCINNATI





**S**END for demonstration ampoules of Lilly's  
Liquid Bland and learn how you can insure  
best results from Iron Carbonate administered  
fresh with every dose.

*Supplied by the drug trade in four-ounce bottles only—Plain,  
with Arsenic, with Strychnine, and with Arsenic and Strychnine.*

**ELI LILLY & COMPANY**  
Indianapolis, U. S. A.



# TAKE NOTICE

## Concerning the Doctor's Use of Alcohol in Prescriptions and Office Pharmacy

We do not propose to enter into the many problems that concern technical Internal Revenue Decisions, but in reply to many questions that reach us from physician patrons regarding the use of alcohol in their practice, we will state as follows:

In our opinion the aim of the Law is to **prevent** beverage alcohol from reaching the public in a **condition** that will enable it to be used as an alcoholic drink. Consequently everyone, including physicians, must conform to the rules, one of which is that only non-beverage alcohol and alcoholic remedies too highly medicated to be employed as a drink, can be used in prescriptions.

**Non-Beverage Alcohol.** Non-beverage alcohol is made by dissolving powerful poisons and specified energetics in alcohol, so as to make it impossible for the mixture to be used as a beverage. This, in our opinion, also makes its use impracticable in medicine. Such alcohol must, according to the rulings, contain appreciable amounts of substances, such as Carbolic Acid, Formaldehyde, Bichloride of Mercury, Alum or Lysol, in varying proportions, any one of which would forbid a physician from employing it as an alcoholic diluent in therapy. To drink such alcohol is to invite death. To use it in the preparation of a vegetable remedy would, in our opinion, be a crime.

## Specific Medicines Not Affected

It is fortunate for the medical profession that every Specific Medicine is so highly medicated, that it cannot be used as a beverage. The extreme dose is a few minims only, usually much diluted with water. There is no alcoholic influence in any possible dose of any Specific Medicine. Physicians can continue to dispense Specific Medicines in the usual manner, making their dilutions with water after the processes long established, according to directions on the label. In this we note the balanced foresight of the "Fathers" of old.

The Specific Medicines as a class are now, after many decades, not only accepted as standards of plant pharmacy, but not one item of the list is prohibited from physicians' use by any government rulings known to us. This applies also to every pharmaceutical preparation bearing Lloyd Brothers' label.

Pharmacists filling prescriptions for Specific Medicines, as well as physicians employing them according to directions on the labels, are not affected by, or concerned in, the Internal Revenue rulings regarding either beverage or non-beverage alcohol.

## TAKE NOTICE

The tax on the alcohol in every Specific Medicine has been paid by us. Physicians and pharmacists can prescribe them or compound them as directed on the labels, without any concern whatever. Only official alcohol is used. **Not one drop of Denatured Alcohol, or Non-Beverage Alcohol is in any Specific Medicine.**

**LLOYD BROTHERS**

FEBRUARY 15, 1918

CINCINNATI



**THE NERVOUS MANIFESTATIONS OF THE EXCESSIVE USE OF TOBACCO**  
are a pointed indication for  
**PASADYNE**  
(DANIEL'S CONCENTRATED TINCTURE)  
(OF PASSIFLORA INCARNATA)  
Its effect in the control of these symptoms shows Pasadyne's  
marked value as a sedative in disturbed nervous function.  
It may be continued indefinitely without producing untoward  
effects.  
**NON-DEPRESSING—NON-HABITUATING**  
SAMPLES AND LITERATURE SUPPLIED TO PHYSICIANS PAYING EXPRESS CHARGES  
LABORATORY OF JOHN B. DANIEL, INC., ATLANTA, GEORGIA.

## SUBSCRIBE NOW

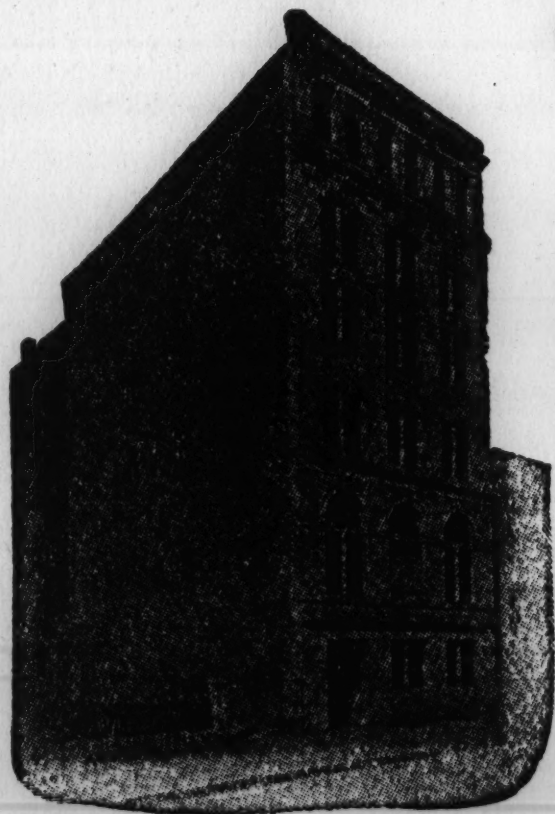
Please sign your name on this page, tear it out and mail to us at once.  
Inclosed you will find \$1.00 for subscription to the California Eclectic  
Medical Journal for one year to begin with your next issue.

Name.....

Address.....

## The Eclectic Medical College

CINCINNATI, OHIO



**ADMISSION:** Certificate of Ohio State Medical Board, fifteen units plus one year of college work in physics, inorganic chemistry, biology and a modern language.

**SESSION:** The 74th annual session begins Sept. 12, 1918, and continues eight months.

**TUITION:** \$120 per year; matriculation fee, \$5.00.

**BUILDING:** New (1910) six-story building at 630 West Sixth Street.

**CLINICAL INSTRUCTION:** Seton Hospital Dispensary, Health Department and Tuberculosis Hospital, Seton, Longview and Cincinnati General Hospital (850 beds).


For bulletin and detailed information address

**JOHN K. SCUDDER, M. D.,**  
630 West Sixth Street, Cincinnati, Ohio



**COD LIVER OIL AND HOT WEATHER**

*One of the strongest traditions among doctors and laymen is the difficulty in taking cod liver oil during hot weather. If this is a real draw-back in the administration of cod liver oil, it is effectively disposed of by the use of*



*the continued use of which is as possible during hot weather as during winter.*

*Cord. Ext. Ol. Morrhuae Comp. (Hagee) offers every therapeutic property of the plain oil, but is palatable.*

*Easily Assimilated*

EACH FLUID OUNCE OF HAGEE'S CORDIAL OF THE EXTRACT OF COD LIVER OIL COMPOUND CONTAINS THE EXTRACT OBTAINABLE FROM ONE-THIRD FLUID OUNCE OF COD LIVER OIL (THE FATTY PORTION BEING ELIMINATED) 6 GRAINS CALCIUM HYDROPHOSPHITE, 3 GRAINS SODIUM HYDROPHOSPHITE, WITH GLYCERIN AND AROMATICS.

*Free from Grease and the Taste of Fish.*

*Supplied in sixteen ounce bottles only. Dispensed by all druggists.*

**Katharmom Chemical Co., St. Louis, Mo.**

**KATHARMON** shows to marked advantage in the fermentative intestinal disorders of summer.

*KATHARMON CHEMICAL CO., ST. LOUIS, MO.*

KATHARMON represents in combination Hydrostic Canadensis, Thymus Vulgaris, Mentha Arvensis, Phytolacca Decandra, 10½ grains Acid Benzoic, 24 grains Sodium Pyroborate to each fluid ounce of Pure Distilled Extract of, Witch Hazel.

### CLUB RATES

The various Eclectic publishers have decided to renew their special club offers to December 1, 1918, on a straight 10 per cent reduction, where two or more journals are ordered at one time. If you are not familiar with any of these journals, samples may be obtained on request.

	Price.	Club Rate.
California Eclectic Medical Journal, 819 Security Bldg., Los Angeles .....	1.00	.90
Eclectic Medical Journal, 630 W. 6th St., Cincinnati, Ohio .....	2.00	1.80
Ellingwood's Therapeutist, 32 N. State St., Chicago, Ill. ....	1.00	.90
National E. M. A. Quarterly, 630 W. 6th St., Cincinnati, Ohio .....	1.00	.90
Nebraska Medical Outlook, Bethany, Nebr. ....	1.00	.90

You may subscribe to any or all of the above journals through this office, the only condition being that subscriptions are paid in advance and 10 per cent discount allowed on an order for two or more, including this Journal.



LESSENED VIRULENCE  
OF SYSTEMIC INFECTIONS  
with a shorter period of illness and hastened convalescence is possible with

**ECTHOL**

ECTHOL is a powerful antiseptic and disinfectant. It is used in the treatment of all systemic infections. It is also used in the treatment of all local infections. It is a powerful antiseptic and disinfectant. It is used in the treatment of all systemic infections. It is also used in the treatment of all local infections.

UNEXCELLED  
**X-RAY EQUIPMENT**

THERE IS AT

**THE WESTLAKE HOSPITAL**

AN X-RAY EQUIPMENT THAT IS NOT  
SURPASSED WEST OF CHICAGO.  
EVERY DETAIL THE VERY LATEST  
AND BEST FOR DIAGNOSTIC AND  
THERAPEUTIC WORK.

**COR. ORANGE AND ALVARADO STREETS**

**LOS ANGELES, CAL.**

**WILSHIRE 245**

**HOME 53088**



# CHIONIA

a preparation of *Chionanthus Virginica* possessing active properties as a cholagogue and hepatic stimulant.

Employed with marked advantage in the treatment of "Biliousness," Jaundice, Intestinal Indigestion, Constipation, Intestinal Stasis, and all forms of Hepatic Torpor where effective stimulation is desired without pronounced catharsis.

*DOSE*—One to two teaspoonfuls three times a day.

PEACOCK CHEMICAL CO.

ST. LOUIS, MO.

## Hospital and Physicians' Supplies

Special prices given to physicians for hospital or office practice on Pharmaceuticals.

DEPOT FOR LLOYDS' SPECIFIC MEDICINES

at best discounts. Mail orders solicited.

**DICKINSON DRUG CO.**

Formerly Dean Drug Co.

Third and Main

Los Angeles, Cal.

SHOW YOUR GRATITUDE

ON JUNE 28th

National War Savings Day

Show the boys "over there" that you are with them----that you deem it a blessed privilege to sign a pledge to purchase all the WAR SAVINGS STAMPS

you can during 1918



War Savings  
Stamps

# Sal Hepatica

EFFERVESCENT  
SALINE COMBINATION  
LAXATIVE & ELIMINANT

Sample on  
request

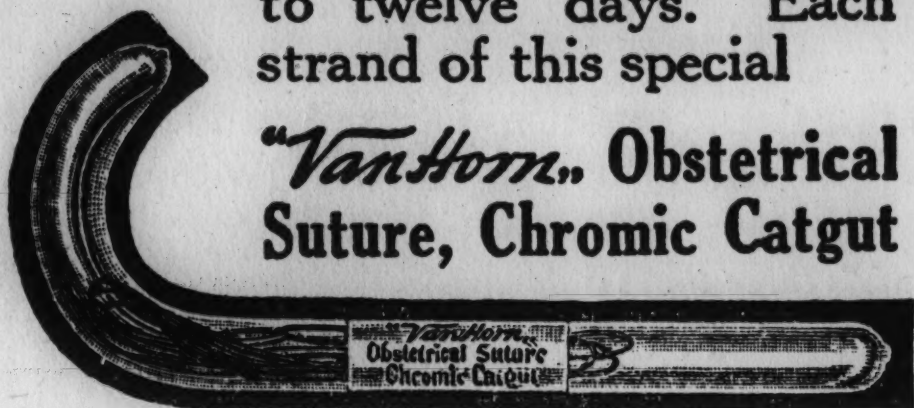
BRISTOL-MYERS  
COMPANY  
NEW YORK





## IN THAT CONFINEMENT TEAR

If you favor immediate repair, use our especially chromicized catgut prepared to hold seven to twelve days. Each strand of this special



*"Van Horn,"* Obstetrical Suture, Chromic Catgut

is threaded on a suitable needle, ready for instant use. Indispensable for your surgical bag. One tube in each box. Price, 25 cents each; \$3.00 per dozen tubes. No samples.

OBTAINABLE FROM YOUR DEALER

*Johnson & Johnson*

**VAN HORN & SAWTELL DEPARTMENT**  
15 & 17 E. 40TH STREET, NEW YORK, U.S.A.

## "Sick Headache"

—and other headaches—

are usually relieved more or less promptly as you remove their cause. In the meantime—

### K-Y ANALGESIC

locally "rubbed in," will usually afford comfort without blistering or soiling.

*Gives Nature's Corrective Forces a Chance*

*No fat or grease. Samples and literature on request.*

*Water-soluble. Collapsible tubes, druggists, 50c.*



*Johnson & Johnson*

**VAN HORN & SAWTELL DEPARTMENT**  
15 & 17 E. 40TH STREET, NEW YORK, U.S.A.

# SALUGEN

In both NAME and NATURE

## SALUGEN

is distinctive

It differs from the mass of extensively exploited so-called antiseptic, deodorant, disinfectant and prophylactic agents, in that

- (a) It is not an ineffectually weak solution of those aromatic substances which are destructive to pathogenic micro-organisms only when applied in the form of concentrated solution.
- (b) It does not merely impart to the surfaces to which it is applied an agreeable odor which simply disguises putrefactive feter.
- (c) It does not bid reliance and in return abet ruin.

## SALUGEN

Is a Harmless and Powerful

ANTISEPTIC, DEODORANT, DISINFECTANT and PROPHYLACTIC

Samples and literature sent on application.

**AMERICAN APOTHECARIES COMPANY**  
ASTORIA, GREATER NEW YORK.



# The California Eclectic Medical Journal

Vol. ~~XXXIX~~ ~~X~~|

JULY, 1918

No. 7

## Original Contributions

### BELLADONNA

J. A. Munk, M. D., Los Angeles, Calif.

Read before the California Eclectic Medical Society.

Belladonna is one of the very best remedies of our vegetable materia medica and no argument is needed to prove it. All Eclectics are familiar with its prompt action in blood stasis and mental hebetude and know the indications for its use. These conditions are often met in general practice and need to be promptly corrected.

There are other conditions that are equally important, but not of such frequent occurrence in which it may be used with equal advantage. It is specifically indicated where there is a moist flabby skin and the extremities are cold. In such a case, belladonna will quickly dry the skin and create a sensation of warmth by sending the blood actively through the capillaries into the cold extremities.

It is also a very positive remedy for controlling chronic muscular spasms, which are apt to occur upon slight provocation, where there is undue irritability of the muscular fiber. Its action can perhaps be best illustrated by referring to a case that was recently treated. I was requested to prescribe for a middle-aged woman who had suffered much from nervous ailments of various sorts for many years. A nervous spell invariably culminated in a muscular spasm in some portion of the body that usually started by turning over in bed or stretching the legs. The cramps were so severe that the pain caused the patient to cry out and was not easily relieved.

The first thing that I noticed during an attack, was that the skin was abnormally cold and clammy and the circulation



sluggish. This combination of symptoms pointed to belladonna as the remedy, which was prescribed with immediate beneficial results. Twenty drops of specific belladonna were added to four ounces of water in a glass, of which mixture the patient was given a teaspoonful every few minutes until the circulation and spasms were improved, when the dose was lessened and given at longer intervals. The medicine was continued daily in broken doses, just enough to keep the skin warm and dry, but was increased on any sign of a return of the spasm.

The patient had been a chronic sufferer for years without finding a relief until she took the belladonna, since which time, now nearly two years ago, she has had no severe attack. Whenever she feels any symptoms of their return she takes a few extra doses of belladonna which stops them at once. The belladonna has given her so much relief that she always keeps a supply on hand.

When giving this agent, a caution should be given the patient, that when the throat begins to feel dry, the medicine should be taken in smaller doses and less frequently, or discontinued entirely. About the time that the dryness is felt in the throat, the pupil of the eye also begins to dilate, and this should also be watched, so as not to get the effect of the medicine too strong.

It is also useful to relieve a cough when there is an excessive secretion of mucus in the pharynx or bronchial tubes. The presence of mucus is apt to cause, or increase a cough, which is nature's effort to clear the respiratory passage of the viscid secretion that may not be serious, but can be very annoying.

That belladonna has a decided action can easily be proven by any doubting Thomas. I recall an experience of this kind that could not possibly have been called psychological. In calling at a house to see a patient, the mother said that her little boy was sick and asked me to prescribe for him. He was not bedfast, but had taken a cold and had the snuffles. The child had a cold and clammy skin and complained of feeling chilly. There was also a profuse secretion of mucus in the nose and throat. I called for a glass of water and dropped into it two one-fiftieth of a grain of atropine tablets and stirred them with a spoon until dissolved. A small teaspoonful was ordered to be given every half hour until the skin became dry and warm, and then less often and in diminished doses. I gave the boy a teaspoonful of the solution, which he took without objection as it was colorless and tasteless. I had not been gone long before the boy went up to the table



and after stirring the glass with the spoon said: "Humph! doctors don't know nothin'; this ain't medicine, but just water," and drained the whole of it at a gulp. It was not long before the boy realized a difference and knew that something was wrong. Not only did the damp skin become dry, but he got red in the face and felt hot all over. I had just reached the office when the mother called up on the telephone and told what had hapuened. I calmed her fears by stating that no harm would likely result, but to have the boy run out of doors in the open air for a walk, which he did and was soon over his adventure. It taught him a lesson, however, that he did not soon forget. In speaking of this experience the boy is ready to admit that doctors do know something, even if their medicine does sometimes look and taste like water.

### THE NEMESIS OF SACCHARINE STIMULATION

Dr. Axel Emil Gibson, Los Angeles, Cal.

With sugar in this article is not meant the cane, grape or beet sugar which have an intrinsic source of sweetness in the very cell of the fruit, or the plant in which it is found. It is first when extracted from its mother substance and passed through the refining process of the sugar factory that sugar obtains the characteristics which designate it to the name and order of a denaturated commercialized product. For this white, taste-piercing powder differs as widely from the sweetness of the fruit, cane or beet, as gunpowder differs from potassium nitrate and sulphur. Like the latter, from being harmless and safe, while remaining in its original combination, sugar as an extract becomes a veritable explosive and as dangerous to the furnace of human physiology as gun-powder to the furnace of our dwelling house. In either case, the relation between cause and effect becomes changed from orderly and controllable chemical reactions to a hap-hazard arrangement of trigger-poised and incalculable affinities.

#### I.

Sugar as such can furnish no legitimate claims to be an agency for the forces of evolution. In the psysiologic, sociologic or psychologic history of mankind there is no indication to be found that the sugar of commerce is necessary for the development and maintenance of physical and mental powers. Previous to the fifth century the world had no other source of sweets than that of honey and natural fruits. Plato, Pythagoras, Socrates, succeeded in evolving their immense intelligence without the assistance of a single ounce of refined sugar;



while the runners and wrestlers at the Olympic games in ancient Greece performed their athletic feats without the need of either the saccharine or alcoholic stimulation.

The first evidence of sugar in the history of man is found not earlier than in the fifth century among the inhabitants of the valley of the Tigris and Euphrates, where it was extracted from the sugar cane and used in the preparation of medicine. Its entrance into the Western world was effected by the Moors during their conquest and occupation of Southern Europe, and also from the returning Crusaders. It was first, however, in the year 1585 that we find a commercial factory established in England; while even as late as in the seventeenth century sugar was so scarce in the Western world that its price, about a guinea a pound, made its use at least to the large middle class, practically prohibitive. At present the consumption of sugar has become universal, and lately reached the fabulous average of about 150 lbs. per capita, which in other words means that each individual man, woman and child, yearly eats almost twice his own weight in sugar.

There is no doubt that in its natural form, sugar exerts an almost universal attraction on most creatures of natural evolution. This attraction has its basis in the needs of the blood and muscles for saccharine elements as contained in the sodium and potassium of the sugar-bearing plants and fruits. But this need is readily gratified in the overwhelming percentage of sweets contained in the natural products of the earth amounting to over one half of its entire food supply. Of the remaining half we find one-third occupied by salt, and one-tenth by bitter and acid ingredients.

The demand for sugar in the system is due to the part it plays in the proteid combustion in the physiological furnaces. The contact of the sugar in the venous blood with the oxygen of the arterial blood, as the two streams meet in the muscles gives rise to a series of physio-chemical explosions, from which springs the energy that moves the pistons and levers in the body mechanism. The command of the will in the movements of an organ—the hand, the foot, the head—can be executed only to the extent there is sugar in the blood to furnish the fuel for the explosions through which energy is released to meet the muscular demand.

The liver is the great refinery through the action of which the raw sugars of the foodstuffs are converted into the nutritionally available form of glycogen. Passing into the liver cells through the hepatic duct from the intestinal absorption the sugar is filtered out from the chyle in the form of glyco-



gen, to be doled out into the general circulation in course of demand. Should, however, the liver, in consequence of a too heavy indulgence in rich foods, such as sweets, starches, cream, fats, etc., find itself so overcharged with fatty acids, bile and glycogen that an excess of the latter is crowded into the circulation, it devolves on the great filter system of the kidneys to eliminate this excess and thus sustain the physiological balance of supply and demand. This balance means that only one-tenth of one per cent of sugar can be floated in the blood stream without incurring danger to the entire organism, as the burning of sugar would then take place in the blood vessels themselves. In other words the same phenomena would occur in the blood vessels as in an ordinary electric circuit, in which the electrodes in place of being polarized in the carbon burner, start ignition in the wire itself.

## II.

Excess of sugar in the system, however, may not only be due to an indulgence in artificial sweets, but to natural sweets themselves, if the fruit be cured, preserved or dried. A too free indulgence in very sweet fruits, such as figs, dates and raisins, especially by persons leading an indoor and sedentary life, may also give rise to an overproduction of sugar in the system. The successful combustion of fruits containing such high percentage of sugar requires not only a great amount of oxygen, but also a corresponding muscular activity for its full systemic utilization.

On the other hand, it is very doubtful if extracted or refined sugar, as such, can enter the organism as a physiologically available substance. Experiments have shown that this sugar is held suspended as an alien body in the system until destroyed by the ever-watchful hormones of the individual's physiological defenses. The very unnaturalness of its substance renders it unfit to enter into the constructive process of the human physiology, and receives its fatal power of attacking the system only after its conversion through fermentation, into alcohol.

Hence it can be safely stated that if followed to its remotest effects in the system the indulgence of refined sugar is in every respect alien and destructive. Having already had its own vital energies dissipated in the refining process, sugar enters the system like a shell in a trench, destroying whatever conditions that may be found in the course of its explosions. Digestion is disturbed, the gastric secretions ruptured in their orderly processes, and to the extent the explosions have been numerous and powerful, the peptonization of the foodstuff



is forced to give way to processes of fermentation and alcoholization.

But if the career of refined sugar in the system leads to fermentation and alcoholization how does it receive its power of stimulation? The question is closely and inseparably connected with the very process of alcoholization, as it derives from and through the latter its sole power of affecting the organism for good and bad.

Hence the study of sugar as a stimulant is the study of alcohol intoxication. For stimulation arising from any other source than from food and nourishment is intoxication, and to the extent it is demonstrated that alcohol contains no proteins available to structural life, no fats or carbohydrates to create warmth and energy in the organism, it follows with irresistible logic, that the stimulating power of alcohol must be found somewhere else than in the field of constructive metabolism.

The power of alcoholic stimulation has its basis and explanation in a system of physiological lever movements as a means of functional self-adjustment by which the speed in the activity of a process is check-reined by the very secretions generated in and by the activity itself. In other words, the whole sweep of organized physiological life, as manifested in the myriad complexities of a living organism, is poised and balanced by internal secretions generated in and through the very excess of the movement, and thus operating on a basis of self-sustaining automatic adjustment.

These internal and in most cases, ductless secretions are comprehended under the name hormones—the engineering corps of organized vital motor activities. A series of scientific experiments carried on by Dr. Bayliss at the University College, London, has demonstrated that the Pancreas, for instance, is engaged in turning out a hormone, the function of which is to regulate the glycogen out-put of the liver. In cases of intense muscular activity, under the strain of physical labor, this hormone releases the checks which regulate the flow of glycogen into the blood, and thus supplies the extra amount of sugar required to sustain the increased combustion in the strained muscles. The accuracy of the functional adjustment is its basis and in the pathological changes of the secretions arising in the over-worked muscles themselves—secretions which when transmitted through the blood stream to the Pancreas, causes an irritation in the latter, resulting in a demand on the liver for an increased output of glycogen.

Another hormone is found in the Thyroid, which holds in its



secretion the power to adjust the action of the heart in exigences of circulation. Thus in fevers, high blood pressure, physical strain, etc., a poison is generated in the involved tissue indicating to the Thyroid that the checks on the heart must be lifted to enable the latter to overcome, by an extra charge of energy, the obstructions thrown into the channels of vital exchanges.

So far so good. Now the presence of alcohol in the system, has the same effect upon the blood as the hormones exert upon a specific function of the system. Only with the difference, however, that while the hormone acts in unison with systemic needs, being an integral part of the vital processes, the action of alcohol is to rudely interfere with the delicately poised anatomical levers of the organism, having no power to rationally coordinate the specific secretions in the physiological chain of life-saving devices. While largely resembling each other in the greater effect, the action of the hormone differs from that of alcohol as a magnetically induced sleep differs from the insensibility following a pugilistic knock-out.

### III.

It is readily seen that stimulation due to alcoholic influence is a stimulation that ultimately leads to general constitutional break-down. And as extracted or refined sugar, directly or indirectly, by fermentation through the gastric reaction evolves alcohol, it follows that the indulgence of sugar constitutes one of the great causes for the premature break-down of the individual, and the increase of mortal diseases characteristic to our present age.

For any stimulation not due to nutritional reactions spells dissipation and loss of life. To exhibit energy is as distant from the generation of energy as the spending of money is to the making of them. The candy—or pastry-eater, is a physiological spendthrift, who throws his vital resources to the four winds as the inevitable fermentation and subsequent alcoholic reaction breaks down the locks of his vital reservoirs, flooding the wastes of his life with misapplied and uncontrollable energy.

In convulsive flow the storage batteries, set aside for advanced age, are released energy sports with borrowed life—exhibiting a flush of mentality which like the burnt-out energy of an exploded fire-cracker terminates its parabolic flight in smoke and collapse.

In other words, natural sugars hold the same relation to extracted sugar as sunlight to pyrotechnics. Like the latter, sugar has no power of producing generative or constructive



forms of heat and energy. Its powers are burnt up and its vitality exploded in the extraction and reduction process of the sugar factory. A veritable shell, bursting in the trenches of our metabolism creating nothing, giving aid to nothing, while unfolding its entire scope of energy in reducing the strength of our vital defenses.

In her adjustment of means to ends, while engaged in the evolution and preservation of her creatures, Nature is found to introduce such combinations of foodstuffs as most safely and efficiently succeed in advancing the principles of life to their highest possibilities. These combinations are contained in those distinct and complete forms of food, as represented by the meat, the grain, the vegetables and the fruit. With health guaranties based upon the very career of evolution these substances enter the system by the legitimate channels of mastication, digestion, assimilation and nutrition.

The natural sugars as contained in the fruit, grain and vegetables are held in such molecular balance as to enter assimilation and absorption without shock to the system. Passing through the graduated steps of digestion, dextrinization and subsequent conversion into glycogen, the carbohydrates transform or transfuse themselves without shock into integral parts of the body's commonwealth, while the artificial sugar, having already in the course of its manufacture passed through these processes, has no nutritional elements to offer the system but rather a nutritional vacuum, which in its action upon digestion breaks up its constructive compounds into physiological chaos.

In the economy of evolution it will be found that nature always gives, and the individual always takes. All natural products are givers of life, while all artificial products are absorbers or robbers of life, and of these, sugar is the most ruthless. Having been robbed originally by the refining process of every thing valuable in its nature—its potassium, sodium, albumen, magnesium, iron, phosphates, sulphates, etc.,—this agent of negative and destructive metabolism spends its entire career in attacking through its vulture nature every substance subject to its morbid life-craving affinities.

"The taste for jams, jellies, candies and confections," says Dr. Wiley in one of his syndicate articles, "is largely an acquired one, and as we accustom ourselves to do without our supply of sugar the craving for it will diminish. Children do not have a craving for sugar unless the taste for it is artificially produced."



## IV.

The ailments due to artificial sweets in the system are as numerous and variable as the disposition of one man's nature differs from another. If the stomach is the weakest link in his physiological chain, the fermentation and acidulation arising from the vampire action of the sugar in his digestive field, will give rise to some type or other of dyspepsia, catarrh, ulcerations, gastritis, etc. If, however, the stomach is constitutionally well fortified, the victim is lulled into a sham safety by a masking of the alien batteries which may select for an attack the, in most cases, overtaxed organs of elimination—the kidneys, liver or pancreas—in some or other form of renal or hepatic disturbance. And as the power of the body to resist the attack of alien micro-organisms, depends upon the power of these organs to keep the system free from accumulating poisons, it follows that their weakening means a weakening of the entire organism. Saturated with poisons, which in their destructiveness are equal to the poison escaping from a leaking sewer, the tissues of the body by breaking down into negative conditions become fertile fields for the growth of catarrh, ulcers, and tumors, like mushrooms, dog-grass and toadstools, flourish in a rotten soil. And to the extent the conditions for the development of such physiological morbidities are favorable, the ensuing growths may intensify their virility and develop into types of actual malignancy.

Furthermore, a poison-soaked system is always subject to "colds"—which again spells poor physiological defense-works. A poisoned nerve is an intoxicated nerve; and that particular nerve, or phase of nervous activity involved in the adjustment of the cuticle to atmospheric changes of cold and heat, etc., under this toxic influence become demoralized and irresponsible to its function. Hence the deadly colds so frequently contracted under the stupor of intoxication, or after the exposure to the poison-charged air of a poorly ventilated theater or leceure hall. The fermentation, alcoholization and subsequent auto-intoxication, due to indulgence in manufactured sweets, by demobilizing the forces of physiological self-defense, leaves the million gateways of the body-pores wide open and unguarded—a fit subject to the vital shocks which a cold draft may cause to the exposed organism. Hence the readiness of a poisoned or impure system to catch cold.

Following in the wake of the tissue-corroding fermentation and alcoholization spreads the vicious flora of a physiological fungus—which in the course of its development, may cover the entire alimentary tube, from sphincter glottis to sphincter



anus. It is the noxious, universal catarrh, which at present, due to the staggering increase of sugar consumption, holds its relentless grip upon the nutritional destinies of the major part of civilized humanity.

In the study of comparative biology the fact has been ascertained that the glary, bloodless mass of the catarrhal tissue has its exact correspondence in the substance of the jelly-fish—a fact not less melancholic than scientific, and which proves that the Darwinian theory, to be complete must embrace a descending as well as an ascending evolution. It proves with tragic certainty that any substance or form of life, if subverted from normal, evolutionary ascent, must sooner or later lose hold of the forces back of its advance, and, in the course of its continued violation of natural laws, slide down the scale of life to the level of the jelly-fish—and even lower. For as the subversion of the catarrhal tissues continues, the exudate is gradually hardening into veritable forms of crystallization—the gall stones and gravel of a diseased liver and kidney. Thus in his unreasoning indulgence of a perverted appetite, the individual actually sinks back into the matrix of the mineral kingdom and experiences, while yet alive, the retrogressive phase of evolution as expressed in the formula: "From dust thou art, to dust thou shalt return."

Finally in its alcoholic degeneracy, the artificial sugar strikes a vicious blow to the entire physiological integrity of the individual. In the destruction, through induced fermentation of the proteid molecule, sugar sows the dragon teeth from which spring the monster brood of alcohol. The emergence of this poison in the organism starts a career of physiological death in the cells and tissues subject to the attacks. Placed side by side on the microscopic slide with a phagocyte the alcohol will speedily demonstrate to what extent it has the power to disturb the integrity and efficacy of bodily life. In an instant of time, the white blood corpuscle is slaughtered, and as this type of blood constitutes the health police and defender of the system over and against the microbes and bacteria of bodily infection, it is readily seen what destructive influence saccharine fermentation with its alcoholic output has upon health. No longer in a position to remove the constantly accumulating waste-matter and fatigue poisons from the system, the latter in consequence begin to ferment and give rise to the flushed and bloated appearance to the face of the habitual consumer of alcoholic beverages—an appearance so often mistaken for "walking pictures of health."

Sugar is the great Tempter of the new dispensation; the



Dead-sea fruit on the overgrown branches of the modern tree of life. The satanic promise held out to the indulging individual is eternally the same: enjoy the fruits of life without the efforts of useful service. Enjoy the spasmodic thrills of the stolen joy of a stimulated appetite until the reactions of its vicious sweetness turns into the bitter realizations of violated vital laws, with the subsequent exodus from a lost paradise of health, power and usefulness.

### **HABITS AND CUSTOMS OF THE PEOPLE IN RELATION TO HEALTH IN INDIA**

**M. R. Ramey, M. D., Bangalore City, India.**

The habits and customs of a people form a very large factor in relation to health and disease in every country, and, although it may be considered utopian in thinking that this subject can be successfully dealt with in a brief account as this, yet I will endeavor to do as fair a justice to the subject as is compatible with the limited space at my disposal.

The progress of sanitation among the masses though slow, must, by the pressure of public opinion and the ever-increasing demands of education for improved surroundings, make its influence dominant; and it is not the object of this essay so much to blame the habits and customs, as to point out in what direction habits and customs, which will take much time and enormous patience to alter, do affect the health of a people.

The ordinary Indian is ignorant and passively resistant to any measure for the control of the spread of infectious diseases which affect his customs and habits, and I endeavor to portray in a brief compass how some features of Indian life may affect the general health of a community. Take, for example, the pollution of drinking water, whether it be a well, tank, temple or mosque; the washing and bathing, the casting off of offering and the absence of any attempt to keep the supply clean. Observe the preparation of food and sweets and the exposure for sale of articles of food; the method of collecting and distributing milk, and the conditions of domestic life! for example, it is not only the poorer class who sit on the ground and eat their food with their hand out of the same dish, but also among the better classes this custom prevails. In the streets can be seen curry and dhal vendors ladling out food with the hand to any passing purchaser. About schools it is common for groups of children to purchase sweets or foods from itinerant vendors, who mix the foodstuffs with their hands and serve it on a piece of paper or leaf smirched



by flies, crows and dust. In the houses of most classes, the father or mother feed their children, who are seated on the ground, out of the same vessel, the father first taking his food, the mother afterward. Again, the proximity of animals, goats, fowls, bullocks, dogs, etc., living in the same room as tenants of houses, the amount of rubbish in houses and the facilities rats, fleas, bugs, lice, mosquitoes and flies have for propagating disease. No one with any experience of the homes of Indians in the large towns, small cities or villages can fail to notice these features of common life, and to allow them to continue when they can be gradually removed is a policy which no conscientious sanitarian would accept, although the task before him be enormous.

In mofussil towns and villages immediate relief can not be hoped for, but as the inhabitants gradually emigrate to large cities they become surrounded with different conditions, and it is then they learn the value of improved sanitary surroundings and systematic supervision. It will, however, take many years of strenuous endeavor on the part of the sanitary authorities before they can get the people to realize the necessity for observing any sanitary precautions. This is nothing new in the sanitary history of the world, and it becomes the duty of civic authorities to constantly impress on the people by precept and example the necessity for the observance of the laws and by-laws relating to health. The city fathers should bodily take up this question, and, while recognizing the superstitious and religious objections, cope with the ignorance of the people and gradually create a desire on their part for healthier surroundings.

India is peopled by diverse races, each having its own social and religious customs and habits (domestic), which have been ingrained in the course of ages, so as to be innate and form a part of the integral whole, whether of the individual or the community to which he belongs.

The customs and habits of the indigenous people, whether in villages, provincial towns or presidency cities, vary according to the community. Whether members of particular communities go they faithfully adhere to and persevere in the customs and habits which from infancy they have acquired and practiced.

**Hindus.**—Three-fourths of the population of India are Hindus. These are divided into several castes, chief of which are Brahmins, Kshatrias, Vaishias and Shudras. The last include all low castes. The Brahmins are the priestly class, highly educated, ministering the religious rites of all the other castes.



They are essentially vegetarians. The only animal food they partake of is milk. For descriptive purposes all of these castes may be divided into two great divisions: (1) Those strictly vegetarians, who include milk in their diet, and (2) those who partake of mixed diet. To the former belong the Brahmins, Bhattias, Jains, Shravak, Bantias, Marwadis and Lobanas; and to the latter, Shenvis, Prabhus, Panchkalsis and Marathas in general; and the last, all the Shudras, who eat indiscriminately everything and partake of meal-leavings from all houses.

The floors of houses occupied by Hindus of all denominations are generally of earth. The practice that obtains in mudfloor houses is to smear them with a mixture of cow dung, red earth and water, which gives not an unpleasant coating to the floor. Disinfection with chemical solutions, even the most patent, is, for obvious reasons impossible. Such house floors are very suitable places for the breeding of fleas. Cow dung may also be the medium or vehicle of diseases, such as diarrhea, typhoid, tubercle, etc. It is to be noted that all Hindus squat and lie on floors.

Some Hindus hold their caste dinners in choultries, or serais, specially built for this purpose. The dinners may be festive or mourning. No plates are used. The meals are doled out on plantain leaves, or when these are not available, on circular "partravalies," made of dried leaves of the *butea frondosa*. Speaking of infectious diseases, smallpox is venerated in houses as the visitation of a deity, people refusing to remove such cases to hospitals voluntarily. This is a fruitful source of infection to the neighborhood. On the eleventh day of the disease, when the pustules are scabbing, a patient is conveyed, generally in a public conveyance, to certain temples, where the goddess "Shitala Devi" is propitiated by offerings.

The females among Hindus during menstrual and lying-in periods are considered as defiles and untouchable. They are set apart in rooms and have no social intercourse.

When a high-class Hindu is on the point of death, he is laid on a country blanket (ghoudy), white or black, as may be available at the time in the house, and a basil leaf and some holy water, preferably that of the sacred Ganga or Ganges, are put in his mouth. If a son is present, he takes the dying head on his lap, and, when all is over, the women sit round the body, weeping and wailing; the nearest female relatives affectionately caress the dead face with their hands and often use the free end of the sadis to wipe the face. The body is next washed near the steps of the house, dressed in white



"dhoti" and transferred to the bier and conveyed to the "ghat" for cremation. The blanket and bed clothes are given to the poor.

The lower castes after the ablution anoint the dead body with tumeric and butter, while females, with the free end of their "sadis," whisk the face, frequently wiping it. The body is dressed up gorgeously and conveyed on the bier for cremation. All infants and persons dying from smallpox are usually buried. The whole of the above description applies, *mutatis mutandis*, in a lesser degree to the mixed diet class. There is "pjurdahnastic" system in some parts of India, especially in northern India.

**Mohamedans.**—The advent of Mohamedans in India amongst Hindus has been iconoclastic in tendency and has led to domestic usages in direct opposition to those of Hindus. Beef was made the staple food of the classes. Mohamedans, as a rule, indulge in mixed diet, while a large proportion of Hindus are vegetarians. The Mohamedan prefers to eat his food in eating-houses—restaurants. The hygienic condition of these eating-houses is very bad. The floors are filthy, the tables and benches are unclean, and practically no storeroom exists for prepared foodstuffs, these being placed underneath a stair or even in close proximity to a privy, water closet, a "mori" or washing place. Generally foodstuffs are kept in open trays without any cover to protect them from flies; if covered, it is generally with a dirty, sodden cloth. Contamination, therefore, of these foodstuffs is frequent and almost certain. On festive and mourning occasions, dinners are prepared in large cauldrons, which perhaps for years have not been tinned, and served to friends and members of respective "jamats." During dinners, one drinking utensil is common to a party, and dinners are served in streets or ground, bare or partially covered by mats, if sufficient accommodation can not be found in houses.

**Parsis.**—Parsis are the followers of Zoroastrianism. The funeral rites among this community are interesting. When a person dies, after due ablution, the body is conveyed to the ground floor and handed over to two or four "Khandias," or corpse-bearers. The corpse is then dressed by them and placed apart in a ground floor room on the stone slabs, where no one is allowed to touch or even approach the body. In the interval before the removal of the body to the Tower of Silence, which invariably takes place in the morning between eight and nine, and in the afternoon between three and four, a priest (Andheroo) continuously chants prayers before the



body. Before the corpse's final removal from the house, a ceremony, called the "Gaihe Sarna," is performed, which consists in the chanting of special prayers by a couple of priests, who stand in the doorway. These prayers are made in two parts. During the first part the body continues to lie on the slab. This over, a dog is brought in and the dead body is exposed to its gaze a few minutes. The corpse is then transferred to a bier by "vassesalas," special corpse-bearers, who alone can consign the body to the Toyer of Silence—the "Khandias"—carrying the body from the house to the tower. The second part of the ceremony is now gone through and completed when the mourners will approach the room where the corpse is to have a last look at it. Further ceremonies are performed for a period of four days on the ground floor, the place in the meanwhile being inaccessible to disinfection. The leaders of the Parsi community are well educated and are termed the merchant princes of Bombay. Their chief habitat is the island of Bombay, although their commerce might have dispersed them all over.

**Depressed Classes.**—The "depressed" classes, consisting of Maharo, Maugs, Blumgis, Chambars and Dhero, whether living in towns or villages, must of necessity live apart, as they are condemned by all Hindus as "untouchables." No other community will live in close proximity to them because of their habits, thieving propensities and immoral proclivities. In villages they live out, all huddled together in small dark mud huts. In towns they live in "chawls," set apart for these people, or in the open in huts, made of wattle and daub, and roofing of old kerosene oil tin sheetings. Their personal habits are very filthy and they seem to flourish in squalor. Mahars from times immemorial have been considered essentially hereditary "village servants," their duties being the removal of dead cattle or other animals, burial of outcasts and removal of offal. They engage also in other occupations, such as rope and basket-making, etc. On account of higher wages they can obtain for labor, they are attracted in large numbers to presidency towns. Here they are employed as dock laborers, coal fillers, and as scavengers by municipalities for the removal of street and domestic refuse.

In this brief account of the customs and habits of the different races that people this vast peninsula I have endeavored to be very faithful to the habits as are in vogue here in different sections of society. In treating a subject of such huge magnitude as this, I solicit the kind indulgence of the readers for any shortcomings that may be present in this dissertation



With Shakespeare I take the liberty of saying, "Since brevity is the soul of wit and tediousness, the limb of outward flourishes—I will be brief."

### SOME FACTS GATHERED IN A FIVE-YEAR COUNTRY PRACTICE IN OBSTETRICS

W. D. Akers, M. D., Oda, Okla.

In a five-year country practice I attended three hundred and seven cases of confinement—one hundred and fifty-eight boys, and one hundred and forty-nine girls, with twenty-five forceps deliveries—fifteen girls and ten boys. I gave pituitrin in forty-nine cases; four times the baby was born in about seven minutes after receiving the hypodermic, and eighteen were born in from fifteen to twenty-five minutes, and twenty-seven were born in from thirty to sixty minutes. Six times the second and third doses were given before satisfactory results were obtained. Four times the results were negative or unsatisfactory.

I had lacerations of the perineum in greater or lesser degree in thirty-six cases, but in this number I never had a complete laceration and all cases were immediately repaired with a varying degree of success.

No mothers died in confinement. Had one case of puerperal septicemia which recovered. Had six cases that had varying degrees of local infection. Two cases had pyelitis and one had nephritis, which died three or four weeks after confinement.

Had three breech presentations, two foot presentations, and one shoulder presentation. Had two still-births, one the result of prolapsed cord, child dead on my arrival; the other died some days before birth from some unknown cause.

Did two podalic versions. Gave H. M. C. to two hundred cases, and as the head distended the perineum, I gave enough chloroform to render the mother insensible to pain. To all cases gave enough chloroform to produce insensibility just at the last, thereby bringing down the blessing of the patient upon my head, and have several times heard the older ladies, who are usually in attendance upon such occasions, say that the pain and suffering in childbirth now is nothing to be compared with what they had to endure when they were young and raising families. In five years have had an average of sixty-one and two-fifths cases per year, or five and seven-sixtieths per month, or one and sixty-seven two hundred and fortieths per week.



Two hundred were born between the hours of twelve midnight and twelve noon, ninety-seven between the hours of twelve noon and twelve midnight, and a hundred and eighty-one were born between the hours of eight in the evening and eight in the morning, and one hundred and twenty-six were born between the hours of eight in the morning and eight in the evening, showing that the majority of this work was done at a time when I should have been at home sleeping.

Of the whole number of births attended, eighty-six were first children, fifty-one were second children, thirty-six were third children, twenty-nine were fourth children, four were fifth children, eighteen were eighth children, fifteen were ninth children, and fourteen were tenth children.

Twenty-six boys weighed nine pounds each. Eighteen weighed ten pounds each. Ten weighed nine and one-half pounds each. Seventeen weighed eight pounds each. Six weighed eleven pounds each. Seventeen weighed seven and one-half pounds each. Twenty weighed eight and one-half pounds each. Ten weighed six and one-half pounds each. Eighteen weighed seven pounds, and twelve weighed six pounds each. Total weight of all boys is one thousand two hundred and sixty-six pounds, and the average weight of the boys is eight and five-ninths pounds.

Eighteen girls weighed seven and one-half pounds each. Seventeen girls weighed eight and one-half pounds. Ten weighed ten pounds. Nine weighed nine and one-half pounds. One weighed sixteen pounds. Nineteen weighed nine pounds each. Four weighed eleven pounds each. Eight weighed eight pounds. Seventeen weighed six and one-half pounds each. Twenty weighed six pounds each and twenty weighed seven pounds each. Total weight of all girls is one thousand and sixty-seven pounds. The average weight of the girls is nine pounds; all boys together weighed one hundred and ninety-nine pounds more than all the girls together, but the average weight of the girls is four-ninths of a pound more than that of the boys. I also find that one hundred and sixteen boys were born between the hours of eight in the evening and eight in the morning, and that ninety-eight girls were born between the hours of eight in the evening and eight in the morning, or that eighteen more boys were born during the night time than girls, and at this point I would suggest it would be well to learn how to determine the sex before birth that you could be able to fix the fee accordingly, for the fee should be higher for night work than for day work.

Abortion and miscarriages average five cases per year, or twenty-five in five years, and delivered two sets of twins—one time a boy and a girl and another time a girl and boy. Had one



case of puerperal convulsions and two serious cases of postpartum hemorrhage, which was controlled with glonoin and atropine and emetine hydrochloride hypodermically.

The combined ages of both fathers and mothers are 13,948 years; the combined ages of all fathers are 6974 years; the combined ages of all mothers are 6900; the average age of the father is 22 307-220; the average age of the mothers is 22 307-146. The youngest father is sixteen years, and the youngest mother is fifteen. The oldest father is fifty-three years and the oldest mother is forty-nine.

Such are the data taken from an incomplete obstetrical record kept for five years. I am very sorry that I did not commence a complete record at the very beginning of my practice nearly twenty years ago. I realize now that if I had I could have had something of interest to offer you at this time. I would urge all to keep a complete record of their obstetrical experiences.

### THINGS GOOD FOR US

By Walt Mason

#### "Uncle Walt's" Exclusive Weekly Message to Judge

When I was young, long years ago, my father said to me, "A physic will be good for us, so here's some senna tea." And so he made me drink a quart before I went to bed, and all the night I wept and moaned and wished that I were dead. The taste of senna tea is punk; it is the worst of brews; it calls to mind a broth that's made of hens' nests and old shoes.

And also, there was castor oil; our parents thought it fine for doping little boys and girls whose health was out of line. My mother used to hold my nose and pour this fluid down; "It's good for you," she used to say; "the finest thing in town."

My teacher used to take a stick and lay me o'er his knee; "It's for you good swat you thus," he used to say to me; and while he lammed and crippled me with chunks of knotty wood, I often wished he didn't care so much about my good.

And now I'm old it's just the same, and life has little charm; unpleasant things are good for me, the pleasant things will harm. I like to ride in motor cars and burn up gasoline, and see the pigs and lambkins play upon the rural green; I like to bask in luxury in my large blue sedan; but doctors shake their heads and say it is a dippy plan. "You ought to store your car and walk," the doctors say to me; "you are too fat and short of breath, and have the housemaid's knee. You ought to start each day and walk across a dozen shires, instead



of lolling in a car, and spoiling rubber tires. Some day, if you don't exercise, you'll crumple up, we ween, and for a billion years or so you won't need gasoline."

I like to ride, I hate to walk; the same old chestnut, sure! I ought to do the thing I hate, the think I like abjure. To trot along on my lame legs is good for me, they say; it's bad for me to loaf around and have some fun all day.

I like to eat the porterhouse and other goodly steaks; I like to fill myself with pies and rich and gorgeous cakes. But they are bad for me, of course; the doctors fairly howl, when they behold me carve a roast or eat a luscious fowl. "Excelsior is what you need," I hear the learned men yell, "excelsior will brace you up and make you hale and well. Oh, eat it boiled and fried and stewed, consume it all day long, and in a month or maybe six we'll see you sound and strong; eat turnip vines and hay and leaves, and wholesome cabbage stocks, but if you stick to steaks and pies, they'll put you in a box."—Judge.



# THE CALIFORNIA ECLECTIC MEDICAL JOURNAL

The Official Organ of the Eclectic Medical Society of the State of California, the Southern California Eclectic Medical Association and the Los Angeles Eclectic Medical Society.

---

O. C. WELBOURN, A.M., M.D.

Editor

D. MACLEAN, M.D.  
Associate Editor

P. M. WELBOURN, A.B., M.D.  
Assistant Editor

---

## SPECIAL CONTRIBUTORS:

JOHN URI LLOYD, Phr. M., Cincinnati, Ohio.

J. W. FYFE, M. D., Saugatuck, Conn.

WM. P. BEST, M. D., Indianapolis, Ind.

FINLEY ELLINGWOOD, M. D., Chicago, Ill.

HARVEY W. FELTER, M. D., Cincinnati, Ohio.

J. B. MITCHELL, M. D., San Francisco.

A. F. STEPHENS, M. D., St. Louis, Mo.

---

Contributions, Exchanges, Books for Review and all other communications should be addressed to THE CALIFORNIA ECLECTIC MEDICAL JOURNAL, 819 Security Building, Los Angeles, California. Original articles of interest to the profession are solicited. All rejected manuscripts will be returned to writers. No anonymous letters or discourteous communications will be printed. The editor is not responsible for the views of contributors.

---

## PREVENTION VS. CURE

For several years this argument has been aired in our medical journals, and the end is not yet. Moreover so far as presented in favor of "prevention" and a like number in favor presented in favor of "precentration" and a like number in favor of "cure." Also quite a few facts can be presented in favor of both prevention and cure and one of the strongest of these is that our most successful practitioners advocate and practice both. Those diseases which can be prevented should be prevented. But what of the remainder—the great majority? Some of them get well of their own accord, but the most of them are cured—by the careful conscientious practitioner. The methods of the prevention of a disease—say Typhoid—are very simple, but the cure requires skill of the highest order. When the former fails the latter is of great importance. And the reader will call to mind other diseases for which this statement is applicable. The time will arrive if it be not here already when a medical man must know the rules of the game for both the prevention and cure. We like it better written, PREVENTION AND CURE.



## BLOOD PRESSURE

C. E. Laws, M. D., Ft. Smith, Ark.

In this day when the practice of medicine is moving forward by leaps and bounds, and new instruments and new methods are attracting the laity as well as the profession, it behooves every physician to at least investigate and be able to discuss intelligently the many short-cuts proposed in medicine and surgery.

A neighbor physician may know little about the practice of medicine, but exploits that little and sets his patients talking about what he knows and does, and he is given credit for being an up-to-date man, while the doctor who does not stop to learn about these new things is very soon failing to command the respect and patronage of perfectly honest people who are endeavoring to secure the best.

That we may study one of the most important of these more recently accepted helps is my reason for choosing to write in an elementary way upon the subject of "Blood Pressure."

The sphygmomanometer has come to stay. The word, from the Greek, means pulse measure, exactly what it is. Insurance companies are demanding the use of these instruments and are largely responsible for their introduction and fairly general use, and not without cause, for the actual knowledge of the blood pressure tells a story all its own.

An eminent authority has said that if he were allowed only two means of diagnosis he would take first, the stethoscope, and second, the sphygmomanometer. Two years ago I was asked for the blood pressure of an applicant for life insurance and found it to be over 200. That man, though in apparently good health, was rejected and is now dead. I also examined a man recently, who had been twice turned down because albumin had been found in his urine. He was healthy, and I wrote a personal letter to the company, giving his blood pressure. He was accepted. If so small a test influences an opinion as to longevity of life, we may well judge that the sphygmomanometer has a very useful field in medicine.

There are many instruments, but chiefly of two kinds: The mercury column in U-tube, and a smaller round instrument with a dial and hand, like a compass. Both instruments have a pneumatic rubber pad to be fastened tightly around the arm above the elbow. This is connected with a bellows pump and also to the column of mercury in the U-tube. By pumping air into the pneumatic pad the arm is compressed, shutting off the



circulation of the arm and raising the column of mercury, whose height is recorded on a graduated scale on the sphygmomanometer, resembling a weather thermometer. By operating a needle valve in the bellows, allowing a little air to escape, the mercury falls very slowly and the pressure upon the arm being relieved allows the pulse to again become perceptible.

The finger upon the pulse detects the first rhythm of the returning circulation, while the eye at this instant reads the height of the mercury. This reading is the systolic pressure. If the mercury should be allowed to continue to fall slowly by operating the needle valve, the pulse becomes full and strong and the mercury is seen to pulsate with every heart beat. A reading taken at the instant the pulse reaches its fullest volume and the mercury is making its greatest excursions up and down in the tube that reading will be the diastolic pressure. By subtracting the diastolic from the systolic pressure we get what is known as the pulse pressure.

More accuracy is obtained by placing a stethoscope upon the brachial artery in the bend of the elbow. The first rush of the smallest bit of blood past the constricting pad is easily audible. A reading of the scale shows the systolic pressure. If the air is released further, the sound of the greater volume of blood rushing by will become louder for a while, and then, as the full volume passes without constriction, the sound becomes less and finally disappears entirely. At this moment the reading will show the diastolic pressure. One can easily remember that the first sound of the passing blood is the systolic pressure and the last sound heard is the diastolic pressure. The systolic pressure is usually spoken of as blood pressure.

The use of the dial instrument is the same except the hand moves around and the pressure is recorded on the dial instead of there being a mercury tube.

In ascertaining the different pressures, many things influence the reading even in perfectly normal people, and a careful study of this subject in a text will have to be made in order to properly judge a reading. Age, sex, physical condition, position of the body, the use of alcohol, and many other things have their influence.

A systolic pressure of 130 in a male adult at the age of 30, and a diastolic pressure of 85, would be considered normal, and yet the stethoscopic method of determining would make the systolic reading probably 135 and the diastolic 75, for the reason that it is easier to hear the pulse than to feel it.



As to age, a good way of remembering is to take a male adult at twenty, whose normal blood pressure (systolic) is about 120. Then for every two years in age add one of blood pressure. Thus, a man at thirty would have a pressure of 125, and at sixty it would be 140.

An abnormal blood pressure, of course, is only a symptom and not a disease in itself. A high blood pressure is usually found in arteriosclerosis, angina pectoris, in acute nephritis, especially in children, as post-scarlatinal. In chronic nephritis the pressure has been known to reach 300 mm. Uremia, endo- and myocarditis are always accompanied by high blood pressure. In aortic regurgitation the heart must develop power enough to deliver a volume of blood sufficient to compensate for the regurgitated, thus increasing the systolic pressure.

A class of diseases which always show a slight rise but not so pronounced as are those above, are: Asthma, chronic bronchitis, neuralgia, obesity, rheumatism, goiter, infectious diseases, such as typhoid and pneumonia. A systolic pressure of 150 or above is a danger signal, and should be investigated and the cause treated.

Some of the conditions showing a low blood pressure are: Diabetes, cardiac dilatation, shock, or collapse, hemorrhage, jaundice, pulmonary tuberculosis, anemia and diarrhea.

Pressures have been known to fall as low as 40 mm. and recover. The administration of chloroform causes gradual deduction in the pressure, while ether gives a moderate rise during its use.

Treatment I will merely outline. The underlying cause is to be sought after. The blood pressure being only a symptom, will be influenced by the changes in the producing disease. However, a sudden lowering may be successfully overcome with drugs, such as adrenalin, digitalis, strychnine, etc. Or, when due to hemorrhage, the Murphy drop. Likewise, a sudden hypertension may be lowered, preventing an apoplectic stroke, by the use of vaso-dilators, sweats, venesection, etc.

### THE TREATMENT OF PELLAGRA

E. H. Bowling, B. S., M. D., Durham, N. C.

As the cause of pellagra is unknown it furnishes a rich field for the medical nihilist. It is rather humiliating that because no one has found that there is a sovereign remedy for the complaint that a great many medical men fold their hands with the complacency that is the twin brother of ignorance and are satisfied to give their patients some form of



arsenic or hypodermics of cacodylate of soda, or worse still to give some palatable placebo and patiently wait while the disease gnaws out the vitals of the patient.

Since the general acceptance of the theory of Goldberger that pellagra is caused by the ingestion of an unbalanced ration, the condition of the average patient is worse than before; for a great many medical men accepting the theory without thinking of the gastric condition of the patient jump to the conclusion that all that is necessary for the cure of the patient is to stuff his anatomy full of the proteids and presto change—the patient is well. It is hard to conceive of a more pitiable sight than to see one of these unfortunates in the last stages of the disease with a gastric irritation of such type that the stomach is not reacting scarcely any of the digestive ferments and certainly no hydrochloric acid, with the ropy saliva stringing down from the mouth sitting over a plate of beans and trying to devour—this to him—nauseous dose, being assured by his physician that if he will eat plenty of beans that the cure is certain, swift and sure.

I do not believe that pellagra is caused by an unbalanced ration and the experiments of Goldberger do not prove to my mind that this is the cause. While these experiments were brilliant and on the face conclusive, still we know that to take a lot of men in the most approved physical condition and put them on a semi-starvation diet for any length of time would so decrease their resisting power and would so lower the opsonic index that they would be subject to any disease, and if as soon as the disease appeared they were put back on a good wholesome diet before there occurred any trophic changes in the stomach that they would recoup all the ground they had lost, by nature's methods; would throw off the disease and regain their accustomed health; but to try to give the emaciated, run-down person this same food would be just a little short of criminal.

The cause of pellagra has never been definitely settled and in the present state of our knowledge one man's theory is worth as much as another's provided he has conscientiously studied the disease in any great number of cases and has gone at his work with his eyes open to see the different phenomena that are plainly evident and with his mind in a receptive mood.

Almost everything has been accused of being the cause, the more prominent of which might be mentioned the ingestion of ordinary maize, excessive use of sugar, the use of cotton



seed oil as a food, the Buffalo gnat, the house fly, an unbalanced ration, and even the lowly bed bug has been tried and convicted by circumstantial evidence.

While all of these theories have their staunch advocates and are championed by men who can wield a lusty blade, none of them with the possible exception of the unbalanced ration theory, as advanced by Goldberger, has been generally accepted by the profession and this theory has not by any means been universally regarded as the cause.

Garrison of the Thompson McFadden Commission, while advancing no definite theory said that he was convinced that it was either an infectious or a contagious affection. With this theory I most heartily agree except I would limit it to an infectious malady.

There are a good many things about pellagra that we know, and a great many that are in the realm of interrogation. For instance, we know that a person may develop the complaint with a normal or possibly an abnormal amount of hydrochloric acid in the gastric secretions, but as the disease advances we see a progressive loss of the acid in the stomach until its final absence. I called attention to this fact some five years ago, and it has been proven correct by a number of observers since that time, and it has been found to be universally true. Here is one of our big question marks; why is it so? What causes this gradual loss of functions that stops the secretion of hydrochloric acid?

Another big interrogation point is: Why is it from infancy to puberty as many males as females develop this disease, this same condition is also true from forty-five to old age, but from puberty to menopause three females have the disease to one male. Could this condition of affairs be explained by any theory that has been explained by any theory that has been advanced as to the causation of the malady? Do not females eat the same food and are not they subject to the same surroundings as the males with whom they live, then why should they be three times as subject to the disease and only woman of the child bearing period? Then again if we accept any theory except that it is caused by an amoeba, how can we account for its evident spread in families in communities in whole sections of the country?

From what has been said above it is evident that I believe that the disease is of amoebic origin. This theory is the fruitage of a careful study of more than four hundred cases, and every other theory had to be relegated to the discard when illumined by the glow of stubborn facts. No theory



except this will account for the phenomena so plainly evidenced in a study of any great number of cases.

Pyorrhea alveolaris has been proven by Bass to be caused by an amoeba and the concurrence of pyorrhea with pellagra, while not universal is so common that it led some observers to believe that pyorrhea was really the cause of pellagra.

The observations carried out for the past eight years forces me to the belief that pellagra is caused by the ingestion of some form of amoebic life, not yet isolated into the stomach, here it multiplies and begets its kind, forms toxins or ptomaines which on being absorbed into the blood has a deleterious effect upon the thyroid gland and the symptoms that we recognize as pellagra is mistly thyroidosis. To those who have had experience with nervous break-downs, hysteria, Cresinism, Myxedema and Graves' disease will recognize a marked similarity all along the line. These other diseases we know are caused by a diseased condition or abnormality in the secretion of the thyroid. Why not call a spade a spade and recognize the diseased conditions of the thyroid in pellagra? Does not this answer this question of why three females in child-bearing period have pellagra to one male? Is it not a fact that five females have goiter to one male at this identical age?

We learned in college that the colloid (glue like), material which is found within the thyroid vesicles and is believed to be their secretion finally ruptures through their walls into the lymph channels and gets into the circulation.

The secretion of the thyroid falls into the class known as internal secretions and exerts a profound influence upon the metabolic processes of the body, probably through the agency of the central nervous system.

Complete extirpation of the thyroid, at least in some animals, produces death, preceded by a group of characteristic symptoms after removal come slowly and resemble the disease known in man as Myxedema. If a piece of thyroid of sufficient size be grafted into one from whom the gland has been removed and the graft takes, the symptoms of thyroid removal are lessened or disappear altogether; also thyroid feeding relieves the symptoms of myxedema. The above facts show that the thyroid must perform some important function in the animal economy and it is believed that this is by virtue of its internal secretions.

As long as theorizing is in vogue why not go a step further and say that the thyroid causes the secretion of hydrochloric acid in the stomach? We little understand the functions of the



thyroid, we know the bad results of its removal and we see the effects of its not functioning properly and why not attribute to it this function of causing the secretion of hydrochloric acid by the stomach?

Whether this is true or not, this much is an open book to all observers, that nervous, hysterical people, in other words those whose thyroids are not functioning properly are always miserable dyspeptics. He who has not tried to cure his neurasthenics by giving general and stomach tonics may throw the first stone.

Then if this theory is really based on fact, that would easily account for the fact that we have the progressive loss of hydrochloric acid in the stomach. We know that the thyroid has an effect on the blood and in all cases of pellagra without exception we see a progressive loss of haemoglobin, this and the acid going hand in hand can have but one common cause.

While this theory may seem a little far fetched, it is possible to draw an analogy from goiter, a disease which has been more extensively studied and about which a great deal more is known than is true about pellagra.

Certain waters cause goiter, but when this water is boiled, i. e., when the amoeba is killed, the same water will not cause the disease. Again from eighty to ninety per cent of cases of goiter are in woman, the same rules apply to cretinism. In the study of goiter it has also been proven that the thyroid produced a substance which acts as an antidote or antitoxine to certain toxic products of daily metabolism. How evident is the loss of this function in any well defined case of pellagra.

Goiter, cretinism, myxedema and pellagra are from three to five times as common among women as among men, the first three we know to be caused by a diseased condition of the thyroid, why are we to believe that pellagra is an exception to the rule?

We can now advance from the marshes and low lands of theory to the high hills of proven facts. Acting upon the theory outlined above, the treatment of this marady is comparatively easy. If the amoeba is really the cause of pellagra then of course we want the best amoebicide in the pharmacopea, and fortunately this has been given us in ipecac. We can give it hypodermically as emetine or per orem as Alcresta Ipecac as prepared by Lilly. My usual plan is to give a ten grain tablet of Alcresta Ipecac every four hours and keep this up for ten days or two weeks or until I am certain that all the germs have been destroyed. With this it is advisable to



give a tablespoonful of castor oil each night, for the double reason of evacuating the bowels and removing the debris from the system, and further the oil such as passes down into the bowel acts as a healing agent for the inflamed membranes.

In this stage it is almost universally true that the mucous membrane of the whole alimentary canal is in a state of active congestion and more probably inflamed. The remedy that in my hands has given universal relief is:

F. E. Condurango, 1 ounce.

F. E. Echinacea, 1 ounce.

Listerine, 2 ounces.

Caripeptic Liq., 4 ounces.

Mix sig, two teaspoonfuls in water one hour after meals three times a day.

When the ipecac has been given for a sufficient time to destroy the amoeba and the gastric and intestinal catarrh has been relieved by the above mixture then can be started the sine qua non in the treatment of pellagra and that is hydrochloric acid in some form. My favorite is freshly prepared chlorine water made as follows:

Take chlorate of potash 40 grains, add pure hydrochloric acid 4 drachms, mix in 8-ounce bottle, and when the bottle is well filled with the chlorine gas add slowly water sufficient to make eight ounces. The resulting mixture should be a rich yellow color and will be rather acid. Of this the usual dose is one teaspoonful in water every two hours. I have never known a patient who could, and did take this mixture for a reasonable length of time that failed to be cured and stay cured, some of them now as long as seven years.

The mistake should not be made, as has happened in my experience a number of times, of giving the chlorine water while the stomach is in a condition of acute inflammation. Should this mistake be made it will cause acute distress to the patient with an aggravation of all the pellagra symptoms. If the patient complains of the medicine burning his stomach and feels as if he had swallowed hot iron, the remedy should be discontinued and the Condurango mixture continued until the stomach is entirely cured. The patient should experience no discomfort from the ingestion of the chlorine water and if he can take it without discomfort continue it until he is cured. One patient under my care took it regularly, without my orders, for twelve months some eight years ago, and has never had a return symptom since. Her case had been pronounced hopeless and did indeed look so when she came into my hands.



If the theory advanced in this paper that the faulty action or possibly non-action of the thyroid accounts for most of the symptoms of pellagra, then we could reasonably expect the chlorides to prove beneficial in its treatment. The Italian physician discovered years ago that sodium chloride was beneficial in the treatment, and we know that possibly no known drug has as good effect on goiter as the long continued use of ammonium chloride. The best known preventive treatment of puerperal eclampsia which it doubtless causes by non-action of the thyroid is chlorate of potash. The chlorides seem to be especially stimulant to the thyroid, this being true we would reasonably deduct the chlorine or the chlorides would benefit pellagra and in actual practice this theory works out most beautifully and satisfactorily.

As to the diarrhea in pellagra, the castor oil usually takes care of that, and it is scarcely ever necessary or advisable to give any astringents or other remedies to check the diarrhea. For the gaseous fermentations that are very general, probably no remedy meets this indication so well as some of the various mineral oils, my preference is liquid vaseline on account of its high specific gravity. As to the loss of hemaglobin and the legion of nervous symptoms, they have to be met by the usual and well known remedies.

In regard to the diet of the pellagrin, I put no restriction on the diet, but advise a well regulated and well balanced ration. I neither advise or interdict a proteid diet. The best criterion is the natural wants of the patient, but my experience leads me to push the carbohydrates, especially the saccharine group with an abundance of fruits as even more desirable than the proteids, but we should not eliminate either or any, but let the patient eat what he most desires and what he can best digest.

I have dealt pretty extensively in theory, now what of the results? In the past two years I have treated along the lines outlined above one hundred and seventy-five cases with a mortality of less than three per cent, and these cases were practically moribund when they came under my care. This is a percentage of cures that I can not boast for measles or whooping cough; diseases that we do not look upon as such dreaded scourges as we do pellagra, and the time is now when we can attack this pestilence with a degree of confidence that a few short years ago bid fair to scourge our fair Southland as a consuming plague.



## NEWS ITEMS

Dr. H. V. Crook, Big Pine, was in Los Angeles last month to visit a surgical case of his at The Westlake Hospital.

Died: Dr. James H. McDonald, Puyallup, Washington, graduate of the American Medical College, 1877, died on April 28, at the age of 77.

Dr. Clyde Roath, Los Angeles, recently passed the State Medical Board of Arkansas.

Dr. J. B. Mitchell, San Francisco, who has been in ill health, is recovered and back at work. Following the death of his wife he was forced to take a long rest.

Dr. C. N. Mosher, Santa Ana, was a frequent visitor at The Westlake Hospital last month, where he has had a gall-bladder patient operated upon.

Dr. H. C. Smith, Glendale, has disposed of his old automobile, and is now driving a new one, Auburn.

June 11th, 1918.

To the Editor,  
California Eclectic Medical Journal,  
Los Angeles, California.

My Dear Editor:

During this strenuous time of War there are a great many people who are of foreign birth, and are fearful lest they will sooner or later have to face internment or imprisonment, because we are at war with the countries of their nationality.

Those of us who have been thrown in the light of foreign situations, must at times have experienced the wonderful liberality and freedom of this country.

I have before me a pamphlet from Washington which I would like to urge every reader of the Journal, foreigner or other, to send for and read through carefully. This can be gotten free of charge. It is entitled:

"Loyalty Leaflet No. 1. Friendly Words to the Foreign-Born. By Hon. Joseph Buffington, Senior United States Circuit Judge of the Third Circuit." Committee on Public Information, Washington, D. C.

There is a series of these publications and I would urge every physician to obtain the chain and place them in his reception-room. There is one of the best places for publicity. The people should learn more about the present-day situation. I am sure Washington will welcome your interest in this matter.

I remain,

Sincerely yours,  
E. R. PETSKY.



So many cases of  
**Pruritus, Chafings,  
and Irritations**

are relieved by applying

**K-Y Lubricating Jelly**

that we feel we owe it to our patrons to direct their attention to the usefulness of this product as a local application, *as well as* for surgical lubrication.

No claim is made that K-Y Lubricating Jelly will act with equal efficiency in every case; but you will secure such excellent results in the majority of instances that we believe you will continue its use as a matter of course.

**NO GREASE TO SOIL THE CLOTHING!**

*Collapsible tubes, 25c. Samples on request.*

*Johnson & Johnson*

**VAN HORN & SAWTELL DEPARTMENT**  
15 & 17 E. 40TH STREET, NEW YORK, U.S.A.

**Hand  
Disinfection**

can be easily and  
conveniently accomplished by the  
use of

**SYNOL SOAP**

This efficient liquid soap enables the physician and surgeon to cleanse and disinfect the hands with gratifying freedom from the irritating effects of caustic soaps and antiseptics. It is particularly serviceable to those who have to cleanse the hands many times each day. Invaluable in the office, operating room and sick chamber.

**ANTISEPTIC—  
CLEANSING—  
DEODORANT**

*Johnson & Johnson*

New Brunswick, N. J.

U. S. A.

**Westlake Pharmacy**

**Corner of 7th and Alvarado Streets**

**Free Delivery**

51890-52890

Wilshire 145

**CACTINA PILLETS**

A remedy that steadies and strengthens the heart by imparting tone to the heart muscle.

Invaluable in all functional cardiac disorders such as tachycardia, palpitation, arrhythmia and whenever the heart's action needs regulating or supporting.

**DOSE**—One to three pillets three or four times a day.

**SAMPLES ON REQUEST**

**SULTAN DRUG CO., St. Louis, Mo.**



1885

1915

## Concerning Echinacea.

**WHAT IS ECHINACEA?** A plant, native to western North America.

**WHAT IS THE THERAPEUTIC STANDING OF ECHINACEA?** In the opinion of renowned laboratory experts who standardize remedies according to physiological processes, Echinacea has no value. (See Lloyd Brothers' Winter Bulletin, 1915, page 13.) In the opinion of physicians who use remedial agents clinically, and who employ it in disease treatment, Echinacea is of exceeding value. (See Lloyd Brothers' Winter Bulletin, pp. 11 and 12).

**WHAT PHYSIOLOGICAL OR POISONOUS QUALITIES HAS ECHINACEA?** It has never been known to kill a creature on the operating table, be it reptile, amphibian or other animal. It seems inactive, physiologically. No chemist has reported that he has obtained from it a toxic agent, or any substance destructive to health. Thirty-eight years' continuous use of Echinacea by physicians in active practice, without a single report of injury or death, proves that it has no unkind action.

**WHO INTRODUCED ECHINACEA?** It was first used by the American Indians, next by the early white settlers, then it became a constituent of a home remedy in Nebraska. At last it came to the attention of Dr. John King, who after special investigation, introduced it under its true name to the medical and pharmaceutical professions.

**WHO WAS DR. JOHN KING?** A physician of unusual talent and education, a believer in conservative medication, an author of international reputation, an American citizen who opposed wrong, however high the authority, and who supported the right, regardless of self-interest. A believer was he in kindness to the sick, a disbeliever in cruelty, to either sick or well, brute or human. The best versed physician of his day in the clinical uses of American drugs, Dr. John King was acknowledged to be. His greatest pride was to serve in the development of American vegetable remedies. His sincerest hope was to see America professionally independent of the rest of the world.

**TRIBUTE OF DR. CHARLES RICE.** This is what Dr. Charles Rice, Chairman for thirty years of the Committee on Revision of the Pharmacopeia of the United States, said of Dr. John King and his great work, the American Dispensatory:

"It constitutes a precious encyclopedia of medical American plants, and their therapeutical uses. It is a very useful work for reference. Its author is as fine a botanist as a judicial observer of therapeutical effects." *Translation from the French of Dr. Charles Rice's "Note sur Certains Medicaments Vegetaux Americains"*.

**WHEN DR. KING SPOKE.** The voice of Dr. King in behalf of a remedy, was no idle word. In the maturity of his experience he used Echinacea in his own family, then in his practice, and when he had thoroughly tested the remedy, he gave to the profession his opinion of the drug.

**A PREDICTION.** Twenty years ago, it was said of Echinacea, "Await the voice of time. If Echinacea stands the test of experience, it will live. If it is inadequate, it will die". Has "Time" spoken?

**THE REPLY.** The most popular American drug today, (1915), as shown by the orders we have received from pharmacists for true pharmaceutical preparations of any American drug, (not compounds or mixtures named after the drug), for the exclusive use of physicians, is Echinacea.

**ECHINACEA TODAY.** Our Winter Bulletin, 1915, pages 11 to 13, presents reports from pharmacologists, conflicting with those from practicing physicians, concerning the therapeutic use of Echinacea. That the laboratory standardizers are correct (see page 13), in that Echinacea is not toxic and will not kill any creature, will be generally conceded. That practicing physicians are not capable of judging of the value of the remedies they use in their practice will be universally resisted.

**WHAT OF THE FUTURE?** Physiological investigators will probably never be able to produce death by the use of any ordinary Echinacea dose. Chemists will probably continue to find Echinacea elusive, so far as the discovery or elaboration of any toxic constituent is concerned. And American physicians who use Echinacea will probably continue to employ and commend it, as they have in the past.

LLOYD BROTHERS, CINCINNATI, OHIO.

October, 1915.



# Save the Thoughtless Dollars

*"I got the sweetest hat today. And, my dear, of course, I didn't really need it, but—"*

\* \* \*

*"What if it is only a few blocks? Here, taxi!"*

\* \* \*

*"I know I'd feel a lot better if I ate less, but I simply must have a big order of—"*

\* \* \*

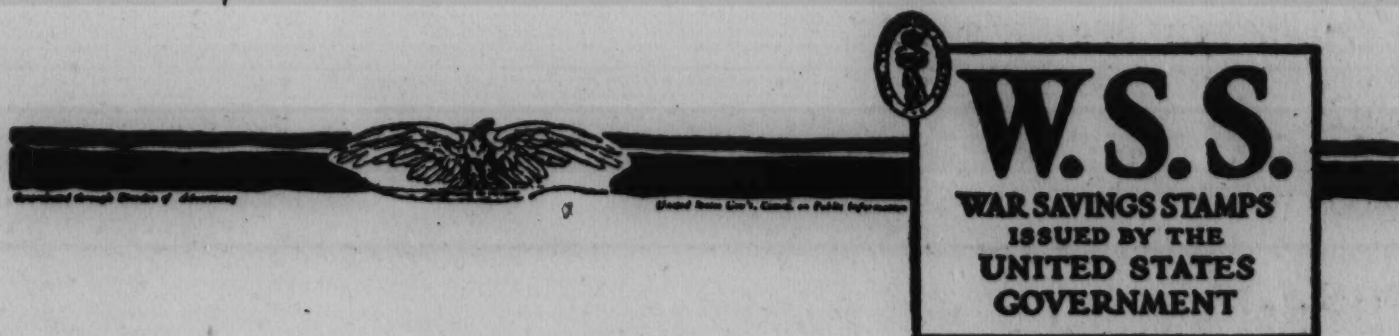
Over there in the Picardy mud, pock-marked with significant craters and "plum-caked" with unspeakable things that once were men, our soldiers can't hear all that some of us are saying. Good that they can't, isn't it? It wouldn't make it any easier to stand firm against those blood-crazed, grey hordes who come on wave after wave because they believe their Kaiser is "God's anointed shepherd of the German people."

\* \* \*

It isn't that we Americans are a selfish people. We have simply been thoughtless.

Money is needed to win this war—let's give it. So far, we have been asked only to lend—to lend at a good round 4% interest.. Turn your THOUGHTLESS dollars into War Savings Stamps.

NATIONAL WAR SAVINGS COMMITTEE,  
WASHINGTON





**SANMETTO**FOR  
**KIDNEY-BLADDER-PROSTATE.****Valuable in Prostatitis-Pyelitis-Cystitis-Enuresis****In Dysuria-Albuminuria****In Irritable and Weak Bladder Conditions****AS A SOOTHER AND MILD DIURETIC****DOSE:—One Teaspoonful Four Times a Day.****OD CHEM. CO., NEW YORK.**

Extracts from Lectures on Therapeutics delivered by

**DR. G. W. BOSKOWITZ**

Compiled by V. von UNRUH, M.D.

A small compend for pocket or desk use, giving in concise form the Therapy of the most widely used drugs of the Eclectic School, and the methods used by Dr. Boskowitz in their administration. Useful formulary in back of book.

Size of the book, 4 1/2 x 7; flexible leather cover; mailed upon receipt of price, \$1.00.

DR. G. W. BOSKOWITZ, 260 West Eighty-sixth Street, New York City, N. Y.

**NEURILLA FOR NERVE DISORDERS NEURILLA**

If Patient suffers from **THE BLUES** (Nerve Exhaustion), Nervous Insomnia, Nervous Headache, Irritability or General Nervousness, give four times a day one teaspoonful **NEURILLA**

Prepared from Scutellaria Lateriflora,  
Passiflora Incarnata and Aromatics.

**DAD CHEMICAL COMPANY, NEW YORK AND PARIS.**

## Are You a Member of the National?

If not, you ought to be a member of your State and National Eclectic Medical Association.

Do you know that the NATIONAL has a right to your influence and help in strengthening its organization?

Membership includes a subscription to the official journal, **THE QUARTERLY**, containing all papers, proceedings and discussions, editorials and current news. It puts you in fraternal touch with the best men in our school.

Send now for application blank and sample **QUARTERLY** to

**Wm. N. Mundy, M. D., Editor****Forest, Ohio**



## Bert Rose Company PRINTERS

120 NORTH BROADWAY  
LOS ANGELES, CAL.

HOME A-5880  
BDWY. 8494

PHYSICIANS' OFFICE STATIONERY  
LETTERHEADS, ENVELOPES  
STATEMENTS, CARDS  
PRESCRIPTION BLANKS

# ERGOAPIOL

(Smith)

For  
AMENORRHEA  
DYSMENORRHEA  
MENORRHAGIA  
METRORRHAGIA  
ETC.

ERGOAPIOL (Smith) is supplied only in  
packages containing twenty capsules.

DOSE: One to two capsules three  
or four times a day. \* \* \*

SAMPLES and LITERATURE  
SENT ON REQUEST.

MARTIN H. SMITH COMPANY, New York, N.Y., U.S.A.



## THE ROBERTSON Compressed Air, Vacuum and Massage CABINET

A valuable adjunct to your office  
Broadens your field

Better equips you for the work

Increases your income

Substantially built cabinet; Mahogany, Golden Oak  
or White Enamel finish.

Height, 35 inches closed, 12 inches square.

Pump and Motor concealed; furnished with 12 feet  
of cord.

Price with six Atomizers.....\$70.00

Price no Atomizers.....\$65.00

## Pacific Surgical Man'f'g Co.

320 WEST SIXTH STREET

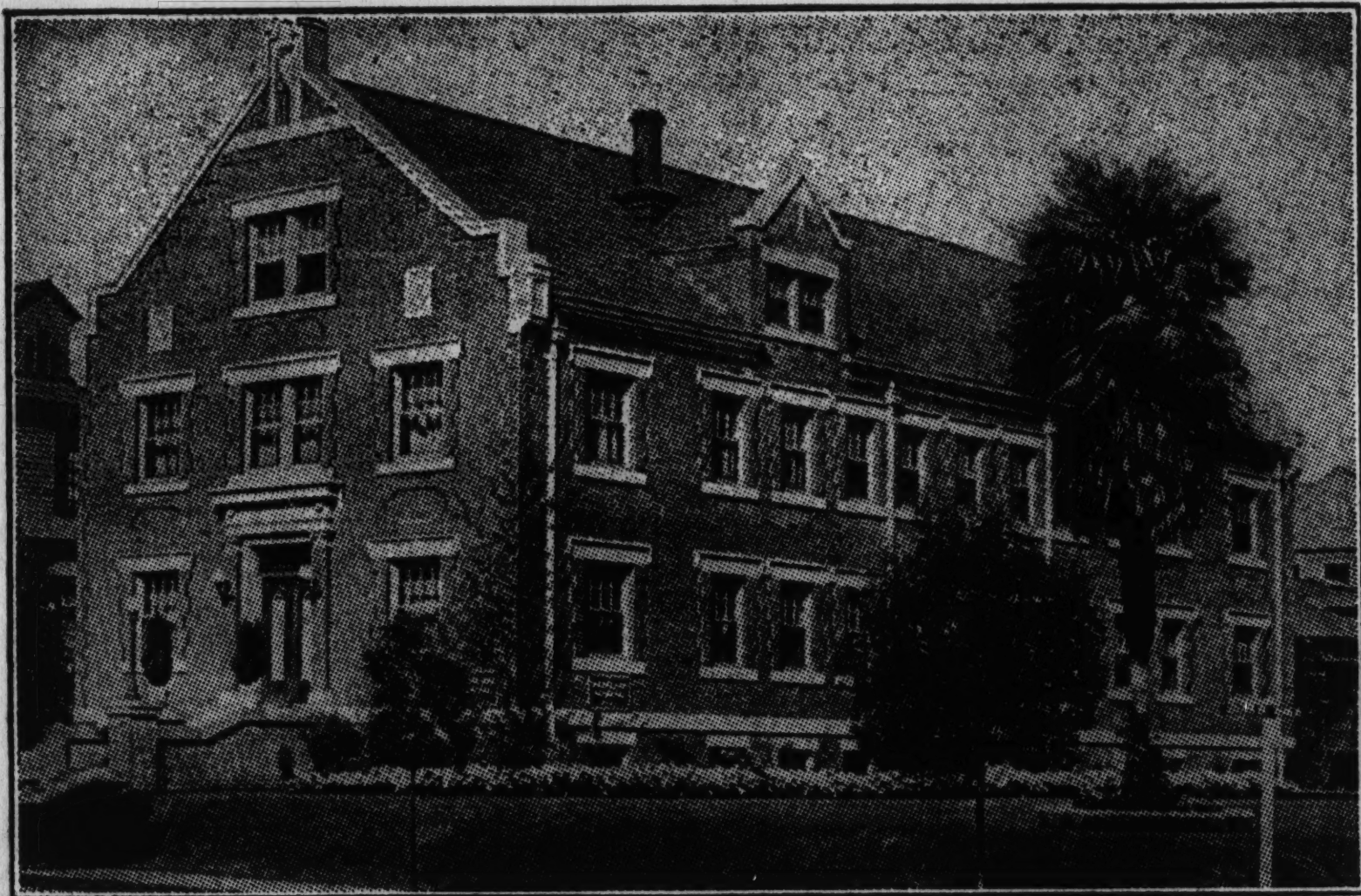
F2495

Main 2959



— THE —

# Westlake Hospital



Corner Orange and Alvarado Sts., Los Angeles, Calif.

This Hospital is located in the best residence section of Los Angeles. The building is new and absolutely **FIREPROOF**.

Operating rooms, equipment, furnishings and service are most complete and the best procurable. Mental and contagious diseases are not admitted.

None but **GRADUATE REGISTERED** nurses are in attendance.

Every courtesy is given physicians desiring to attend their own patients.



## Table of Contents

ORIGINAL CONTRIBUTIONS:	Page
Belladonna.....J. A. Munk, M. D.	145
The Nemesis of Saccharine Stimulation.....Axel Emil Gibson, M. D.	147
Habits and Customs of the People in Relation to Health in India.....R. W. Ramey, M. D.	155
Some Facts Gathered in a Five Years' Country Practice in Obstetrics.....W. D. Akers, M. D.	160
 EDITORIAL:	
Prevention vs. Cure.....	164
 SELECTIONS:	
Blood Pressure .....	165
New Treatment of Pellagra.....	167
NEWS ITEMS.....	174

---

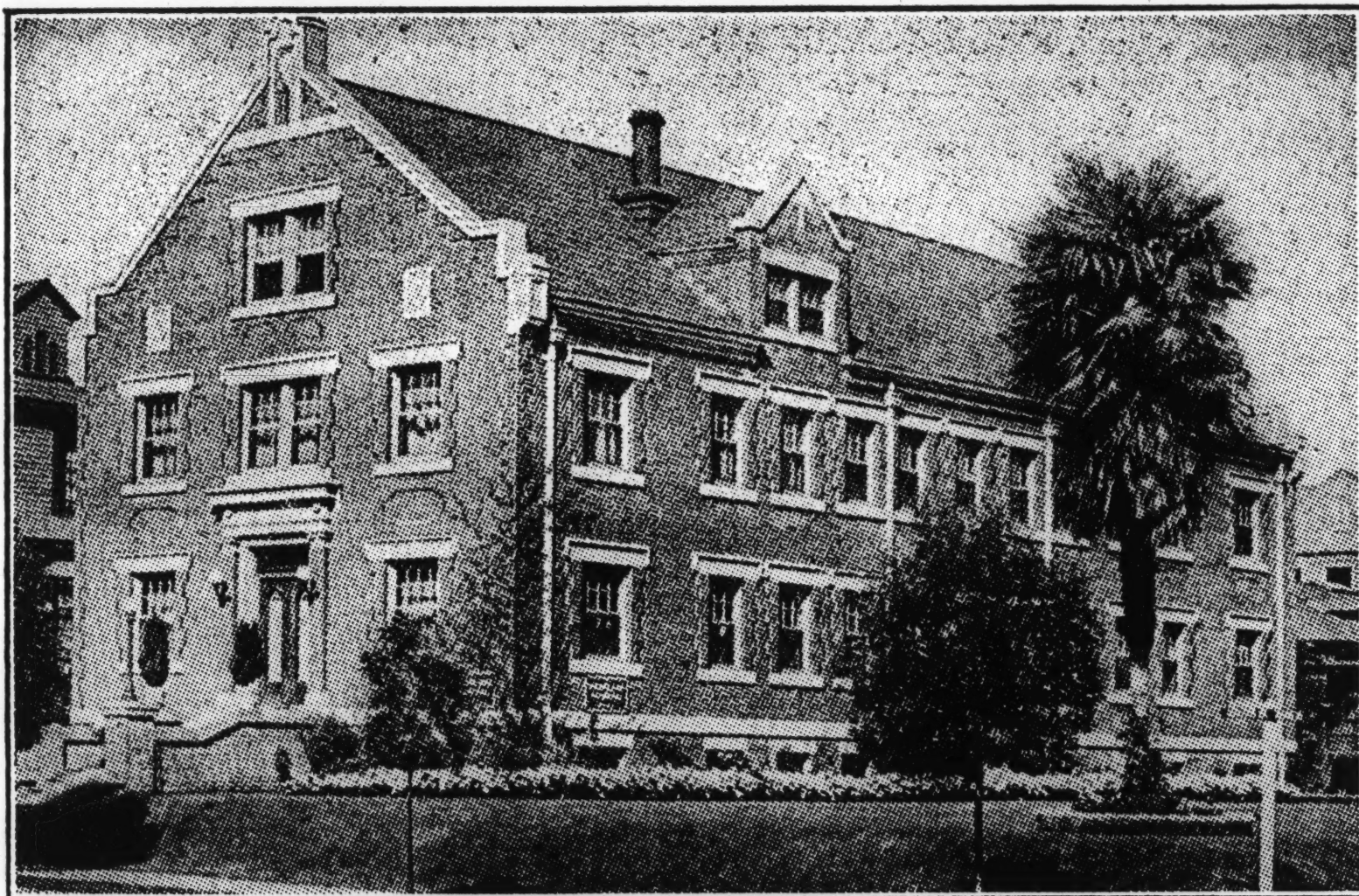
## INDEX TO ADVERTISERS

American Apothecaries Co.....viii	Kress & Owen Co.....vii
Antiphlogistine, Denver Chem. Co...i	Lloyd Bros. ....ii
Battle & Co.....vi	Lloyd Bros. ....x
Bristol-Myers Co. ....v	National, Wm. N. Mundy, Editor...xii
Chicago Pharmacal Co.....xi	Od Chemical Co.....xii
Dad Chemical Co.....xii	Peacock Chemical Co.....v
Dickinson Drug Co.....v	Pacific Surgical Mfg. Co.....xiii
John B. Daniel.....iv	Parke, Davis & Co.....Cover 1
Eclectic Books .....	Purdue Frederick Co.....ix
Eclectic Medical College.....iv	Sultan Drug Co.....xi
Ell Lilly & Co.....Cover 2	Westlake Pharmacy .....
Fellows Co. ....Cover 4	Van Horn & Sawtell.....viii, ix
Katharmon Chemical Co.....iii	Westlake Hospital .....



— THE —

# Westlake Hospital



Corner Orange and Alvarado Sts., Los Angeles, Calif.

This Hospital is located in the best residence section of Los Angeles. The building is new and absolutely **FIREPROOF**.

Operating rooms, equipment, furnishings and service are most complete and the best procurable. Mental and contagious diseases are not admitted.

None but **GRADUATE REGISTERED** nurses are in attendance.

Every courtesy is given physicians desiring to attend their own patients.



## Table of Contents

ORIGINAL CONTRIBUTIONS:	Page
Belladonna.....J. A. Munk, M. D.	145
The Nemesis of Saccharine Stimulation.....	
.....Axel Emil Gibson, M. D.	147
Habits and Customs of the People in Relation to Health in India.....R. W. Ramey, M. D.	155
Some Facts Gathered in a Five Years' Country Practice in Obstetrics.....W. D. Akers, M. D.	160
 EDITORIAL:	
Prevention vs. Cure.....	164
 SELECTIONS:	
Blood Pressure .....	165
New Treatment of Pellagra.....	167
NEWS ITEMS.....	174

---

## INDEX TO ADVERTISERS

American Apothecaries Co.....viii	Kress & Owen Co.....vii
Antiphlogistine, Denver Chem. Co...I	Lloyd Bros. ....II
Battle & Co.....vi	Lloyd Bros. ....X
Bristol-Myers Co. ....v	National, Wm. N. Mundy, Editor...xii
Chicago Pharmacal Co.....xi	Od Chemical Co.....xii
Dad Chemical Co.....xii	Peacock Chemical Co.....v
Dickinson Drug Co.....v	Pacific Surgical Mfg. Co.....xiii
John B. Daniel.....iv	Parke, Davis & Co.....Cover 1
Eclectic Books .....	Purdue Frederick Co.....ix
Eclectic Medical College.....iv	Sultan Drug Co.....xi
Ell Lilly & Co.....Cover 2	Westlake Pharmacy .....
Fellows Co. ....Cover 4	Van Horn & Sawtell.....viii, ix
Katharmon Chemical Co.....iii	Westlake Hospital .....



**R**      **Syrupus**  
**Hypophosphitum Comp.**  
**FELLOWS**

It is not unusual to meet the claim that other preparations are "just as good" as FELLOWS, but no one has met the preparation which rightly claimed to be better than FELLOWS. For over fifty years FELLOWS' SYRUP has maintained its supremacy as the standard preparation of the *Compound Hypophosphites*.

**Reject** < **Cheap and Inefficient Substitutes**  
**Preparations "Just as Good"**